

AMENDED FILING COVER SHEET

Amended File Title	Amended Explanation
Jurat	Arkansas Insurance Department requested to split out the Medicaid business from the risk business.
Analysis of Operations by Lines of Business	Arkansas Insurance Department requested to split out the Medicaid business from the risk business.
Underwriting and Investment Exhibit - Part 1	Arkansas Insurance Department requested to split out the Medicaid business from the risk business.
Underwriting and Investment Exhibit - Part 2	Arkansas Insurance Department requested to split out the Medicaid business from the risk business.
Underwriting and Investment Exhibit - Part 2A	Arkansas Insurance Department requested to split out the Medicaid business from the risk business.
Underwriting and Investment Exhibit - Part 2B	Arkansas Insurance Department requested to split out the Medicaid business from the risk business.
Underwriting and Investment Exhibit - Part 2C	Arkansas Insurance Department requested to split out the Medicaid business from the risk business.
Exhibit 2 - Accident and Health Premiums Due and	Arkansas Insurance Department requested to split out the Medicaid business from the risk business.
Exhibit of Pregs, Enrollment and Utilization (by Stat	Arkansas Insurance Department requested to split out the Medicaid business from the risk business.
Schedule T	Arkansas Insurance Department requested to split out the Medicaid business from the risk business.



47155201820100105

ANNUAL STATEMENT

For the Year Ended December 31, 2018
OF THE CONDITION AND AFFAIRS OF THE

Delta Dental Plan of Arkansas, Inc.

NAIC Group Code	0000	0000	NAIC Company Code	47155	Employer's ID Number	71-0561140
	(Current Period)	(Prior Period)				
Organized under the Laws of	Arkansas		State of Domicile or Port of Entry	AR		
Country of Domicile	US					
Licensed as business type:	Life, Accident & Health	[]	Property/Casualty	[]	Hospital, Medical & Dental Service or Indemnity	[X]
	Dental Service Corporation	[]	Vision Service Corporation	[]	Health Maintenance Organization	[]
	Other	[]	Is HMO Federally Qualified?	Yes [] No []		
Incorporated/Organized	March 15, 1982		Commenced Business	August 1, 1982		
Statutory Home Office	1513 Country Club Road		Sherwood, AR, US	72120		
	(Street and Number)		(City or Town, State, Country and Zip Code)			
Main Administrative Office	1513 Country Club Road					
	(Street and Number)					
	Sherwood, AR, US	72120	501-835-3400			
	(City or Town, State, Country and Zip Code)		(Area Code) (Telephone Number)			
Mail Address	1513 Country Club Road		Sherwood, AR, US	72120		
	(Street and Number or P.O. Box)		(City or Town, State, Country and Zip Code)			
Primary Location of Books and Records	1513 Country Club Road		Sherwood, AR, US	72120	501-835-3400	
	(Street and Number)		(City or Town, State, Country and Zip Code)	(Area Code) (Telephone Number)		
Internet Web Site Address	www.deltadentalar.com					
Statutory Statement Contact	Deborah Ann Lowtharp		501-992-1634			
	(Name)		(Area Code) (Telephone Number)	(Extension)		
	dlowtharp@deltadentalar.com		501-992-1635			
	(E-Mail Address)		(Fax Number)			

OFFICERS

	Name	Title
1.	Eddie Allen Choate	President and CEO
2.	Sarah Jean Clark	Secretary
3.	Phillip Wayne Cox	Treasurer

VICE-PRESIDENTS

Name	Title	Name	Title
Ina Lynn Harbert	Senior Vice President and COO	John Garrett Norman	VP, Information Technology
James Wayne Couch	Senior Vice President and General Counsel	Ashley Lynne Riddle	VP of Sales & Account Management
Robert Allen Mason	Vice President of Professional Relations	Kelly Terese Carney	Vice President of Human Resources
Ebb Weldon Johnson	VP, Exec Director, DDAR Foundation	David Edward Hawsey	VP, Marketing
Jimmy Sam Anthony #	Director, Medicaid Operations	Deborah Ann Lowtharp #	VP, Finance & CFO

DIRECTORS OR TRUSTEES

Mel Taylor Collazo	Phillip Wayne Cox	Robbins Mark Bailey	Troy John Dryden Bartels
Arnoud Krijt	Cindy Hovis Boyle	Tamika Silverman Edwards	Joseph Wood Thompson
Sarah Jean Clark	James Talbert Johnston	Granville Wayne Callahan, Sr.	Doug Robert Anderson

State of Arkansas
County of Pulaski ss

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

(Signature) Eddie Allen Choate (Printed Name) 1.	(Signature) Sarah Jean Clark (Printed Name) 2.	(Signature) Phillip Wayne Cox (Printed Name) 3.
President and CEO (Title)	Secretary (Title)	Treasurer (Title)
Subscribed and sworn to (or affirmed) before me this on this day of , 2019, by		

a. Is this an original filing? [] Yes [X] No
b. If no: 1. State the amendment number 1
2. Date filed 05/03/2019
3. Number of pages attached 10